

Foster Family Home - Corrective Action Report

Provider ID: 5-140026

Home Name: Marites Anacleto, CNA

3815 Uakea Place

Lawai

HI 96765

Review ID: 5-140026-9

Reviewer: Ieri Van Houten

Begin Date: 11/9/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter, and

Comment:

6.(d)(1) - Unannounced home inspection for 3 bed CCFFH recertification. Report issued during home inspection with written plan of correction due to CTA by 12/9/2020.

Foster Family Home

Background Checks

[11-800-8]

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1) - CG#3 does not have current eCrim report in file.

Foster Family Home

Fire Safety

[11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

Comment:

46.(a) - Fire drill not completed for October 2020

Foster Family Home

Records

[11-800-54]

54.(c)(5) Medication schedule checklist;

54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;


Comment:

54.(c)(5) - Client #3-Medication missing from MAR. [REDACTED] at bedtime as needed listed as current MD order, but is missing from MAR.

54.(c)(6) - Client #3-Service plan due for renewal 8/2020, current copy missing from client chart



Compliance Manager



Primary Care Giver

11/9/2020

Date

11-9-2020

Date

Community Care Foster Family Home (CCFFH)
Written Plan of Correction for Deficiencies
Listed in Corrective Action Report
Chapter 17-1454

CCFFH Name: MARITES ANACLETO, CNA

CCFFH Address: 3815 WAKEA PLACE, LAWAII, HAWAII 96765

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
8(a)(1)	CG#3 have current eCrim and it's already in file.	11-9-20	I will check every month to make sure eCrim is current and up to date.
46.(a)	Will check and do monthly fire drills and recorded.	11-9-20	PCG will record every and keep in file all monthly fire drills.
54.(c)(5)	Client #3-Just received updated MAR from my case management.	11-9-20	PCG will make sure all medications taken are listed in the MAR whenever new orders is (are) prescribed.
54.(c)(6)	Client #3-my case management already emailed me missing service plan and already place it in file.	11-10-20	PCG will checked and remind case manager for any missing Service Plan monthly.

Primary Caregiver's Signature: Marites Anacleto

Print Name: MARITES ANACLETO

Date of Signature: 11-10-2020



CTA has reviewed all corrected items